# **Miscellaneous Medications**

# **Anti-Cholinergics and Amantadine**

Can Be Used to Treat: Movement Disorders Caused by Medications

If your child shows signs of shaking (hands, arms, legs, face), muscle stiffness, slow movements, or lack of balance, he may be beginning to have a movement disorder caused by his medications. Certain drugs like antipsychotics can cause these unwanted side effects to occur.

To help relieve such symptoms, your healthcare provider may prescribe an anticholinergic medication or an anti-movement medication.

## **Types of Anti-Movement Medications:**

Anti-Cholinergic	Anti-Movement
benztropine (Cogentin)	amantadine (Symmetrel)
trihexyphenidyl (Artane)	

 Benztropine and trihexyphenidyl should only be used when your child has movement symptoms. Once these movement symptoms go away, your healthcare provider may want to slowly stop these medications.

## Possible Side Effects:

Anti-Cholinergic	Amantadine					
Dry mouth	Nausea					
Blurred vision	Constipation					
Sleepiness	Diarrhea					
Confusion	Dizziness					
Nervousness	Dry Mouth					
Delusions	Confusion					
Constipation	Insomnia					
Urinary retention	Water retention					

## Follow Up:

- While your child takes these medications, watch for the improvement of movement disorders.
- Watch for side effects that may occur with each drug.
- Problems can occur if the medication is stopped suddenly without slowly reducing (tapering) the dose.
- Do not stop taking these medications without talking to your child's healthcare provider first.

# **Opioid Blockers**

### Can Be Used to Treat:

- Narcotic (opioid) dependence
- Alcohol dependence
- Self injurious behavior

Narcotic (opioid) and alcohol dependence are conditions where a person struggles to stop taking narcotic drugs (heroin, morphine, etc.) or alcohol. Long-term use of narcotics and alcohol causes the body to become dependent or addicted to these drugs. As a result, the person feels he or she needs narcotics or alcohol all of the time.

Naltrexone is a medication used to block the "high" feeling a person gets from narcotic drugs. Therefore, it helps former drug users to stay off narcotics and also keeps patients from wanting alcohol.

It is important to remember that one should not use large amounts of narcotics to overcome what naltrexone is suppose to do because it could lead to coma or death.

### Type of Opioid Blocker and Side Effects:

Opioid Blocker	Side Effects						
Naltrexone (Revia)	Nausea, Vomiting, Diarrhea,						
	Headache, Stomach pain, Loss of						
	appetite, Anxiety						

- This medication should not be used if your child has taken narcotic drugs within the past 7-10 days.
- Liver tests are needed before using naltrexone because this medication can cause liver injury.

Purpose What is the medicine for?				*			26
When to take When and times per day							
Dose Mg, units, puffs, drops, etc.							
Name of Medicine Brand Name Generic Name							

# Medication Safety

	Keep an updated list of all the medications your child takes. Include prescription drugs,
	over-the-counter medicines, and herbal remedies and vitamins. Share this list with your
	prescriber and pharmacist.
	Be sure that all medications are kept out of reach of children and anyone who might
, ,	misuse them. You may want to keep medications in a locked container. Be especially
	careful with medications that look like water or soft drinks.
	Never tell your child that his or her medicine is "candy".
	Some medications need to be kept in the refrigerator. But, be sure medications do not
	freeze. Keep medications separate from food. You might want to store them in a
	separate box or container in the refrigerator.
	Always read the medication labels carefully before you give your child medication. Be
	sure that it is your child's medication and that you are giving the right dose, at the right
	time, and that you give the correct way.
	Give medication to your child where there is good light so you can read the medication
	label easily.
	Keep medicine in its original bottle or container from your pharmacy. Do not mix different
	medications together in the same container because then you will not be able easily tell
	which medication is which.
	Store all medicines together in one place that is dry and cool. The kitchen and bathroom
,,,,,,,,,,	may not be the best place to store medicine because of the heat and moisture in these
	rooms.
	Never give your child's medications to someone else.
	Throw away any medication that has expired or that your child's prescriber has stopped.
	Also, throw away any medication that does not have a label on the container. Throw out
	medication so that children and animals will not find them. A good way to do this is to
	wrap the medication in duct tape or throw it away mixed with kitty litter.

#### Resources:

#### General resources on the web:

<u>www.aacap.org</u> American Academy of Child and Adolescent Psychiatry (AACAP)- has multiple resources, including Facts for Families and a section of great related web sites that's constantly updated.

www.aboutourkids.org This is NYU's Child Study Center website with lots of resources.

www.aap.org American Academy of Pediatric's website.

www.cfw.tufts.edu: Tuft University's Child and Family webguide.

www.parentsmedguide.org; Developed jointly by the American Psychiatric Association the American Academy of Child and Adolescent Psychiatric.

http://www.webmd.com

Add-Adhd/guide/Adhd-treatment-overview

http://www.psychquides.com/

Bipolar%20Handout.pdf

http://www.nimh.nih.gov

Health/publications/medications/antidepressant-medications.shtml

http://www.nimh.nih.gov/

health/publications/medications/antipsychotic-medications.shtml

http://www.psycheducation.org/

Depression/meds/moodstabilizers.htm

#### **Specialty Websites for Parents:**

ADHD: www.addresources.org; www.chadd.org (Children and Adults with Attention Deficit

Disorder)

Anxiety: www.adaa.org (Anxiety Disorders Association of America)

Autism: www.autism-society.org; www.autismspeaks.org

Bipolar: www.bpkids.org (Child and Adolescent Bipolar Foiundation); www.dbsalliance.org

(Depression and bipolar support Alliance)

Obsessive Compulsive Disorder: www.ocfoundation.org

PTSD: www.ptsdinfo.org

Tourettes syndrome: www.tsa-usa.org

#### Textbooks:

Pediatric Psychopharmacology: Fast Facts, by Daniel Connor, MD and Bruce Meltzer, MD, Norton Publishing, 2006

Child and Adolescent Clinical Psychopharmacology, Fourth Edition, by Wayne Green, Wolters Kluwer/Lippincott Willliams and Wilkins, 2007

Clinical Manual of Child and Adolescent Psychopharmacology, edited by Robert Findling, MD, APA Publishing, 2008